

**Request for Approval under the “Administration for Children and Families Generic for Information Collections Related to Gatherings”**

**(OMB Control Number: 0970-0617)**

**TITLE OF INFORMATION COLLECTION:** National Center on Substance Abuse and Child Welfare Convening Registration Information Collection

**PURPOSE:** The purpose of the survey is to collect information prior to respondent participation in planned convenings. Information will be used for planning purposes.

**DESCRIPTION OF RESPONDENTS:** Individuals who participate in convenings through the National Center on Substance Abuse and Child Welfare (NCSACW).

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The information collected is not intended to be disseminated to the public<sup>1</sup>.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.

Name and affiliation: Surina Amin, Child Welfare Program Specialist

To assist review, please provide the following information:

**BURDEN HOURS**

The estimated burden includes registration for about 6 total annual Convenings. The time to complete the questions is estimated to average about two minutes.

| <b>Instrument Title</b> | <b>Category of</b> | <b>No. of</b> | <b>Participation</b> | <b>Burden</b> |
|-------------------------|--------------------|---------------|----------------------|---------------|
|-------------------------|--------------------|---------------|----------------------|---------------|

<sup>1</sup> The information collected through this request is primarily for internal review and will not be published. However, for certain activities information submitted by accepted participants, such as research abstracts to be presented in a poster session, may be published on an ACF website or included in a printed or online program for the activity or subsequent publication describing the activity.

|  | <b>Respondent</b>                   | <b>Respondents</b> | <b>Time</b>      |                |
|--|-------------------------------------|--------------------|------------------|----------------|
| NCSACW Convening Registration Information Collection | Private Sector                      | 35                 | 4 minutes        | 2 hours        |
| NCSACW Convening Registration Information Collection | State, Local, and Tribal Government | 35                 | 4 minutes        | 2 hours        |
| NCSACW Convening Registration Information Collection | Individuals                         | 35                 | 4 minutes        | 2 hours        |
| <b>Totals</b>  |                                     | <b>105</b>         | <b>4 minutes</b> | <b>6 hours</b> |

**FEDERAL COST:** The estimated annual cost to the Federal government is \$1,155.

#### **Administration of the Instrument**

1. How will you collect the information? (Check all that apply)

Web-based or other forms of Social Media

Telephone

In-person

Mail

Other, Explain